Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 1 of 64

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on	Christina		
	your government-issued picture identification (for example, your driver's	First name	First name	
	license or passport).	Middle name	Middle name	
	Bring your picture identification to your	Cappello		
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years	FKA Christina Fiandaca		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2912		
	·····			

Entered 03/31/16 11:30:36 Page 2 of 64 Case 16-11060 Doc 1 Filed 03/31/16 Desc Main Document

Case number (if known)

Debtor 1 Christina Cappello

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
		■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	951 Dearborn Circle	If Debtor 2 lives at a different address:
		Carol Stream, IL 60188 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		DuPage	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)

Entered 03/31/16 11:30:36 Page 3 of 64 Case 16-11060 Doc 1 Filed 03/31/16 Desc Main

Document Case number (if known) Debtor 1 Christina Cappello

7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by</i> f page 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.
	choosing to file under	■ C	hapter 7			
		□с	hapter 11			
		□с	hapter 12			
		□с	hapter 13			
8.	How you will pay the fee	•	about how yo	u may pay. Typ attorney is sub	pically, if you are paying the fee yo	k with the clerk's office in your local court for more details ourself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with
					tallments. If you choose this options (Official Form 103A).	on, sign and attach the Application for Individuals to Pay
			I request that but is not req applies to yo	t my fee be wa uired to, waive ur family size ar	aived (You may request this option your fee, and may do so only if yound you are unable to pay the fee in	n only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out
			the Application	n to Have the (Chapter 7 Filing Fee Waived (Offic	ial Form 103B) and file it with your petition.
9.	Have you filed for bankruptcy within the last 8 years?	■ No	-			
	•		District		When	Case number
			District		When	Case number
			District		When	Case number
10.	Are any bankruptcy cases pending or being	■ No)			
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	es.			
			Debtor			Relationship to you
			District		When	Case number, if known
			Debtor			Relationship to you
			District		When	Case number, if known
11.	Do you rent your residence?	■ No	Go to I	ne 12.		
		□ Ye	es. Has yo	ur landlord obta	ained an eviction judgment agains	t you and do you want to stay in your residence?
				No. Go to line	12.	
				Voc Eill out In	vitial Ctatement About on Eviation	Judgment Against You (Form 101A) and file it with this

Document Page 4 of 64 Case number (if known) Debtor 1 Christina Cappello Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

immediate attention?
For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 5 of 64

Debtor 1 Christina Cappello

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 6 of 64

Deb	tor 1 Christina Cappelle	0	Document	Ca	ase number (if known)	
Part	6: Answer These Quest	ions for Repo	orting Purposes			
16.	What kind of debts do you have?			sumer debts? Consumer deb al, family, or household purpo		2. § 101(8) as "incurred by an
			No. Go to line 16b.			
			Yes. Go to line 17.			
			re your debts primarily busioney for a business or investr			
			No. Go to line 16c.			
			Yes. Go to line 17.			
		16c. St	ate the type of debts you owe	that are not consumer debts	or business debts	
17.	Are you filing under Chapter 7?	□ No. I a	m not filing under Chapter 7.	Go to line 18.		
	Do you estimate that after any exempt property is excluded and			you estimate that after any ex able to distribute to unsecured		d and administrative expenses
	administrative expenses		No			
	are paid that funds will be available for distribution to unsecured creditors?	•	Yes			
	How many Creditors do you estimate that you	■ 1-49 □ 50-99		☐ 1,000-5,000 ☐ 5001-10,000	□ 25,001 □ 50,001	1-50,000 1-100,000
	owe?	☐ 100-199 ☐ 200-999		10,001-25,000	☐ More t	than100,000
19.	How much do you estimate your assets to	□ \$0 - \$50,0 □ \$50,001 ·		□ \$1,000,001 - \$10 millio	·	000,001 - \$1 billion 0,000,001 - \$10 billion
	pe worth?	■ \$100,001 □ \$500,001	- \$500,000	□ \$50,000,001 - \$50 ml □ \$50,000,001 - \$500 r	illion □ \$10,00	0,000,001 - \$10 billion 00,000,001 - \$50 billion than \$50 billion
20.	How much do you estimate your liabilities	□ \$0 - \$50,0 □ \$50,001		□ \$1,000,001 - \$10 millio	_ ' '	000,001 - \$1 billion 00,000,001 - \$10 billion
	to be?	\$100,001 \$500,001	- \$500,000	□ \$50,000,001 - \$100 m □ \$100,000,001 - \$500 r	illion 🔲 \$10,0	000,000,001 - \$50 billion than \$50 billion
Part	7: Sign Below		***************************************			
	you	I have exam	ined this petition, and I declar	e under penalty of perjury tha	t the information provided	is true and correct.
	,	If I have cho	sen to file under Chapter 7, I	am aware that I may proceed, of available under each chapte	if eligible, under Chapter	7, 11,12, or 13 of title 11,
		If no attorne	y represents me and I did not	pay or agree to pay someone	who is not an attorney to	·
		document, I	have obtained and read the n	otice required by 11 U.S.C. §	342(b).	
		I request reli	ef in accordance with the cha	pter of title 11, United States (Code, specified in this pet	ition.
		bankruptcy of and 3571.	case can result in fines up to \$	oncealing property, or obtainin S250,000, or imprisonment for		
		Christina (Signature of		Signature	e of Debtor 2	
		Executed on	March 31, 2016 MM / DD / YYYY	Executed	d on MM / DD / YYYY	

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 7 of 64

Debtor 1 Christina Cappello Document Page 7 of 64 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Terrand	ce S. Leeders	Date	March 31, 2016
Signature of	f Attorney for Debtor		MM / DD / YYYY
Terrance S	S. Leeders		
Printed name			
Leeders &	Associates		
Firm name			
205 W. Ra	ndolph St.		
Suite 1240)		
Chicago, I	IL 60606		
	City, State & ZIP Code		
Contact phone	312-346-7400	Email address	tleeders@leederslaw.com
6244638			
Bar number & S	State		

		Docume	11L 1 aac 0 01 0 4	
ill in this infor	mation to identify your	case:		
Debtor 1	Christina Cappell	0		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	259,942.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	17,129.47
	1c. Copy line 63, Total of all property on Schedule A/B	\$	277,071.47
Par	2: Summarize Your Liabilities		
			i abilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	237,837.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	23,201.05
	Your total liabilities	\$	261,038.05
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	781.04
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,275.00
Pai	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Entered 03/31/16 11:30:36 Desc Main Doc 1 Filed 03/31/16 Case 16-11060 Document

Page 9 of 64 Case number (if known) Debtor 1 Christina Cappello

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

1,732.13

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total clair	m
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Case 16-11060			itered 03/31/16 11:30 ie 10 of 64	0:36 Desc	c Main
Fill in t	his information to identify you	ır case and this filing	:			
Debtor	1 Christina Cappe	Middle Name	Last N	ame		
Debtor (Spouse,		Middle Name	Last Na	ame		
United	States Bankruptcy Court for the:	NORTHERN DISTR	RICT OF ILLINOIS			
Case n	umber					Check if this is an amended filing
Offic	ial Form 106A/B					
	edule A/B: Pro	perty				12/15
think it fi informat Answer (category, separately list and descrits best. Be as complete and accuion. If more space is needed, attacevery question. Describe Each Residence, Buildi	rate as possible. If two in the separate sheet to the separate sheet	married people are fili nis form. On the top of	ng together, both are equally res any additional pages, write you	sponsible for supp	olying correct
1. Do yo	ou own or have any legal or equital	ole interest in any reside	ence, building, land, o	r similar property?		
□ No	. Go to Part 2.					
■ Ye	s. Where is the property?					
1.1		What	is the property? Check	all that apply		
	51 Dearborn Circle reet address, if available, or other description	on \Box	Single-family home Duplex or multi-unit bu Condominium or coop	uilding the amou	int of any secured o	ns or exemptions. Put claims on Schedule D: Secured by Property.
_			Manufactured or mobi		value of the	Current value of the

ICIC		Single-family home		Do not deduct secured claims or exemptions. Put		
Street address, if available, or other description			Duplex or multi-unit building Condominium or cooperative	the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.		
IL State	60188-0000 ZIP Code		Manufactured or mobile home Land Investment property	Current value of the entire property? \$259,942.00	Current value of the portion you own? \$259,942.00	
		□ □ Who	Timeshare Other has an interest in the property? Check one Debtor 1 only		f your ownership interest enancy by the entireties, or	
		prop	erty identification number:	(see instructions)	ommunity property	
	e, or other des	e, or other description	IL 60188-0000 State ZIP Code Who Other	Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another	Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$259,942.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No 				
3. C	Cars, vans, trucks, tractors, sport utility ve	ehicles, motorcycles		
	l No			
	Yes			
3.1		Who has an interest in the property? Check one	the amount of any secure	ed claims on Schedule D:
	Model.		Creditors Who Have Cla	ims Secured by Property.
		<u> </u>		
		·	chare property:	portion you own.
	Lien held by Citizens Finance,			
	value from Nadaguides.com		<u>\$15,650.00</u>	\$15,650.00
5 <i>A</i>	Yes Add the dollar value of the portion you ov			\$15,650.00
Do	you own or have any legal or equitable ir	terest in any of the following items?		portion you own? Do not deduct secured
<i>E</i>	E <i>xamples:</i> Major appliances, furniture, linens ☑ No ─	s, china, kitchenware		
•	Yes. Describe			
	Miscellaneous	Household Goods		\$500.00
E	Examples: Televisions and radios; audio, vice including cell phones, cameras, roll No		rs, scanners; music collecti	ions; electronic devices
	Yes. Describe			
E	collectibles of value Examples: Antiques and figurines; paintings, other collections, memorabilia, co ■ No	prints, or other artwork; books, pictures, or other art ollectibles	objects; stamp, coin, or ba	aseball card collections;
	■ No ☑ Yes. Describe			
E	equipment for sports and hobbies Examples: Sports, photographic, exercise, a musical instruments No	nd other hobby equipment; bicycles, pool tables, golf	f clubs, skis; canoes and ka	ayaks; carpentry tools;
	Yes. Describe			
10	Firearms			
10.	Examples: Pistols, rifles, shotguns, ammun	ition, and related equipment		
	No			
	☐ Yes. Describe			

Document Page 12 of 64 Debtor 1 Christina Cappello Case number (if known) 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... **Used Personal Clothing** \$250.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ No Yes. Describe..... \$500.00 Miscellaneous costume jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses ☐ No Yes. Describe..... \$0.00 3 dogs 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,250.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Yes..... \$200.00 Cash 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... \$29.47 **Checking account with Bankcorp Bank** 17.1. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No

Case 16-11060

Doc 1

Filed 03/31/16

Entered 03/31/16 11:30:36

Desc Main

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 13 of 64 Debtor 1 Case number (if known) Christina Cappello ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No

Debtor 1	Case 16-11060 DOC 1 Christina Cappello	Document	Page 14 of 64 Case number (if known)	Desc Main
☐ Yes.	Give specific information			
	sts in insurance policies ples: Health, disability, or life insurance	; health savings account (HSA); credit, homeowner's, or renter's insurar	nce
☐ Yes.	Name the insurance company of each Company name:		Beneficiary:	Surrender or refund value:
If you somed	terest in property that is due you from are the beneficiary of a living trust, expense has died. Give specific information		ed surance policy, or are currently entitled to rec	eive property because
Exam _l ■ No	s against third parties, whether or no ples: Accidents, employment disputes, i			
■ No	contingent and unliquidated claims of Describe each claim	of every nature, includin	g counterclaims of the debtor and rights to	set off claims
■ No □ Yes.	nancial assets you did not already lis			
	the dollar value of all of your entries art 4. Write that number here		ny entries for pages you have attached	\$229.47
Part 5: De	escribe Any Business-Related Property Yo	ou Own or Have an Interest	In. List any real estate in Part 1.	
■ No. Go	own or have any legal or equitable interes o to Part 6. Go to line 38.	st in any business-related p	roperty?	
	escribe Any Farm- and Commercial Fishin you own or have an interest in farmland, list it		n or Have an Interest In.	
■ No.	u own or have any legal or equitable Go to Part 7. s. Go to line 47.	interest in any farm- or o	commercial fishing-related property?	
Part 7:	Describe All Property You Own or Have	e an Interest in That You Did	l Not List Above	
Exam _l ■ No	u have other property of any kind you ples: Season tickets, country club memi			
	Give specific information the dollar value of all of your entries	from Part 7. Write that n	umber here	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Case 16-11060

Page 15 of 64

Case number (if known) Document Debtor 1 **Christina Cappello**

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$259,942.00
56.	Part 2: Total vehicles, line 5	\$15,650.00		
57.	Part 3: Total personal and household items, line 15	\$1,250.00		
58.	Part 4: Total financial assets, line 36	\$229.47		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$17,129.47	Copy personal property total	\$17,129.47
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$277,071.47

Official Form 106A/B Schedule A/B: Property page 6

		Docume	IIL I AUC IO OI O I		
Fill in this infor	mation to identify your	case:			
Debtor 1	Christina Cappell	lo			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				_	if this is an led filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the F	Property	You	Claim	as Exempt	Ċ
---------	----------	-------	----------	-----	-------	-----------	---

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Check only one box for each exemption. Schedule A/B			
951 Dearborn Circle Carol Stream, IL 60188 DuPage County	\$259,942.00	59,942.00 ■ \$15,000.00		735 ILCS 5/12-901
value from Zillow.com, will surrender Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2014 Mazda Mazda 3 44,000miles	\$15,650.00		\$2,400.00	735 ILCS 5/12-1001(c)
Lien held by Citizens Finance, value from Nadaguides.com Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
2014 Mazda Mazda 3 44,000miles	\$15,650.00		\$1,142.00	735 ILCS 5/12-1001(b)
Lien held by Citizens Finance, value from Nadaguides.com Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Miscellaneous Household Goods Line from Schedule A/B: 6.1	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
Elle Holli Geriedale AVD. GT			100% of fair market value, up to any applicable statutory limit	
Used Personal Clothing Line from Schedule A/B: 11.1	\$250.00		\$250.00	735 ILCS 5/12-1001(a)
LING HOTH GOLIEGAIG AV.D. 11.1			100% of fair market value, up to any applicable statutory limit	

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 17 of 64
Case number (if known)

escription of the property and line on ule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim	Specific laws that allow exemption
		Cho		
	Scriedule A/D	CHE	ck only one box for each exemption.	
Illaneous costume jewelry	\$500.00	•	\$500.00	735 ILCS 5/12-1001(b)
Stredule A/B. 12.1			100% of fair market value, up to any applicable statutory limit	
om Schedule A/R: 16 1	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
Line from S <i>chedule A/B</i> : 10.1			100% of fair market value, up to any applicable statutory limit	
	\$29.47		\$29.47	735 ILCS 5/12-1001(b)
=			100% of fair market value, up to any applicable statutory limit	
	om Schedule A/B: 12.1 om Schedule A/B: 16.1 king: Checking account with corp Bank om Schedule A/B: 17.1	som Schedule A/B: 12.1 spon Schedule A/B: 16.1 spon Schedule A/B: 16.1 spon Schedule A/B: 16.1 spon Schedule A/B: 17.1 spon Schedule A/B: 17.1	om Schedule A/B: 12.1 symbol Schedule A/B: 16.1 symbol Schedule A/B: 16.1	som Schedule A/B: 12.1 \$200.00 \$200.0

			Document Pag	e 18	of 64		
Fill	in this informat	ion to identify you	ır case:				
Deb	otor 1	Christina Cappe	ello				
	-	First Name	Middle Name Last Na	ime			
	otor 2 use if, filing)	First Name	Middle Name Last Na	ıme			
Unit	ted States Banki	uptcy Court for the	NORTHERN DISTRICT OF ILLINOIS				
	se number						
(if kn	own)					-	if this is an
						amend	ded filing
Off	icial Form	106D					
Sc	hedule D	: Creditors	Who Have Claims Secu	ured	by Propert	V	12/15
							4: If
s ne	eded, copy the A		If two married people are filing together, both out, number the entries, and attach it to this fo				
	ber (if known).						
	_ *	ve claims secured by	,, , ,	I	. h della a la (a managed and their famous	
	_		his form to the court with your other schedu	ies. You	i nave notning eise t	o report on this form.	
		l of the information	below.				
Par	t 1: List All S	Secured Claims			Column A	Column B	Column C
			more than one secured claim, list the creditor seps s a particular claim, list the other creditors in Part 2		Amount of claim	Value of collateral	Unsecured
			cal order according to the creditor's name.	Z. A3	Do not deduct the	that supports this	portion
2.1	Citizens Bar	nk	Describe the property that secures the claim	ո։	value of collateral. \$12,108.00	claim \$15,650.00	If any \$0.00
	Creditor's Name		2014 Mazda Mazda 3 44,000miles		<u> </u>	<u> </u>	
			miles				
	Attn: Bankrı		Lien held by Citizens Finance, valu	ne			
	443 Jefferso	n Blvd Ms	from Nadaguides.com As of the date you file, the claim is: Check all t	that			
	Rjw-135 Warwick, RI	02886	apply.				
		iy, State & Zip Code	☐ Contingent☐ Unliquidated				
	ramber, eneet, en	y, otato a zip ocac	☐ Disputed				
Who	o owes the debt	? Check one.	Nature of lien. Check all that apply.				
	Debtor 1 only		☐ An agreement you made (such as mortgage	or secu	red		
	Debtor 2 only		car loan)				
_	Debtor 1 and Debto	•	Statutory lien (such as tax lien, mechanic's I	lien)			
		debtors and another	☐ Judgment lien from a lawsuit	aco Ma	anay Sacurity		
	Check if this clain community debt	n relates to a	Other (including a right to offset)	iase ivid	oney Security		
		Opened					
		Opened 9/01/13					
		Last Active					
Date	e debt was incurre	ed 9/25/15	Last 4 digits of account number 9	428			
	7.					*	4
2.2	Loancare Se	ervicing Ctr	Describe the property that secures the claim		\$225,729.00	\$259,942.00	\$0.00
	Oreditor 3 Name		951 Dearborn Circle Carol Stream, IL 60188 DuPage County				
			value from Zillow.com, will				
	Interstate Co	orporate	surrender				
	Center	p	As of the date you file, the claim is: Check all t apply.	that			
	Norfolk, VA	23502	☐ Contingent				
	Number, Street, Cit	y, State & Zip Code	Unliquidated				
\A/L :	a awaa tha dabu	Chaole on -	Disputed				
_	o owes the debt	r Uneck one.	Nature of lien. Check all that apply.	or coo:	rod		
	Debtor 1 only Debtor 2 only		☐ An agreement you made (such as mortgage car loan)	or secul	eu		
اب	JEDIOI Z ONIY						

☐ Debtor 1 and Debtor 2 only

 \square Statutory lien (such as tax lien, mechanic's lien)

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 19 of 64

Debtor 1 Christina	a Cappello		Case n	number (if know)	
First Name	Middle N	lame Last Name		_	
☐ At least one of the d☐ Check if this claim community debt		☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)	First Mortgage		
Date debt was incurre	Opened 8/01/12 Last Active 2/03/15	Last 4 digits of account nun	nber <u>8573</u>		
	e of your form, add	Column A on this page. Write that nur the dollar value totals from all pages		\$237,837.00 \$237,837.00	-

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

			Documer	nt Page 2	0 of 64		
Fill in t	this information	to identify your o	ase:				
Debtor	· 1 C h	ristina Cappello)				
		t Name	Middle Name	Last Name			
Debtor		. Name	Middle Name	Last Name			
(Spouse	ir, filing) Firs	t Name	Middle Name	Last Name			
United	States Bankrupt	cy Court for the:	NORTHERN DISTRICT (OF ILLINOIS			
Case r	number						
(if known						_ c	heck if this is an
						a	mended filing
⊃π: -:	:al Earra 40	CE/E					
	ial Form 10						40/45
			ho Have Unsecue Part 1 for creditors with PR				12/15
Schedul eft. Atta	le D: Creditors Whach the Continuatind case number (i	no Have Claims Secu on Page to this page f known).	red Leases (Official Form 10 ired by Property. If more spa e. If you have no information	ce is needed, copy	the Part you need, fill it o	out, number the ent	tries in the boxes on the
Part 1:		our PRIORITY Un					
_	•	e priority unsecured	I claims against you?				
	No. Go to Part 2.						
	Yes.						
Part 2:	List All of Y	our NONPRIORIT	Y Unsecured Claims				
3. Do	any creditors hav	e nonpriority unsec	ured claims against you?				
	No. You have noth	ing to report in this pa	art. Submit this form to the cou	rt with your other sch	edules.		
	Yes.						
uns tha	secured claim, list the	he creditor separately	ims in the alphabetical orde for each claim. For each claim at the other creditors in Part 3.1	listed, identify what	type of claim it is. Do not lis	st claims already inc	luded in Part 1. If more
							Total claim
4.1	A/r Concepts	5	Last 4 digits	of account number	3493,3560		\$200.00
	Nonpriority Credit		W/ 4b-	- dalid in annua d0	44		
	18-3 E Dunde Barrington, I		when was the	e debt incurred?	14		-
		ity State Zlp Code	As of the date	you file, the claim	is: Check all that apply		
	Who incurred th	e debt? Check one.					
	Debtor 1 only		☐ Contingent	t			
	Debtor 2 only		☐ Unliquidate	ed			
	Debtor 1 and	Debtor 2 only	☐ Disputed				
	☐ At least one o	f the debtors and ano	ther Type of NONI	PRIORITY unsecure	d claim:		
	☐ Check if this	claim is for a comm	nunity	ans			
	debt Is the claim sub	iect to offset?	☐ Obligations report as prior		aration agreement or divor	ce that you did not	
	■ No	,		-	ng plans, and other similar	debts	
	☐ Yes		Other. Spe		ality Roselle II		
			- Other. Spe	iony - I maniorp			

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 21 of 64

Debtor 1 Christina Cappello Case number (if know) 4.2 **Arnold Scott Harris PC** Last 4 digits of account number 6271 \$0.00 Nonpriority Creditor's Name 111 W Jackson Blvd When was the debt incurred? 2015 Suite 600 Chicago, IL 60604 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Notice Only 4.3 **Aurora Police Department** Last 4 digits of account number 0455 \$150.00 Nonpriority Creditor's Name **Red Light Photo Enforcement** When was the debt incurred? 2015 1200 E Indian Trail Rd. Aurora, IL 60505 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes tickets Other. Specify 4.4 Blatt Hasenmiller Leibsker & Moore, Last 4 digits of account number 4459 \$0.00 Nonpriority Creditor's Name 10 S LaSalle St. Suite 2200 When was the debt incurred? 2015 Chicago, IL 60603 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Notice Only ☐ Yes

Document Page 22 of 64 Debtor 1 Christina Cappello Case number (if know) 4.5 Capital One Last 4 digits of account number 2790 \$464.73 Nonpriority Creditor's Name Attn: Bankruptcy Opened 6/01/11 Last Active Po Box 30285 When was the debt incurred? 3/25/15 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes Central Dupage Emergency 9731 \$415.00 4.6 **Physician** Last 4 digits of account number Nonpriority Creditor's Name **PO Box 366** When was the debt incurred? 2015 Hinsdale, IL 60522 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Bills** Other. Specify 4.7 \$422.35 Last 4 digits of account number 9618 Chase Nonpriority Creditor's Name PO BOX 659754 When was the debt incurred? 2015 San Antonio, TX 78265-9754 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify overdraft

lacksquare Debts to pension or profit-sharing plans, and other similar debts

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 23 of 64

Debtor 1 Christina Cappello Case number (if know) 4.8 Check N go Last 4 digits of account number 7785 \$1.500.00 Nonpriority Creditor's Name 2222 Bloomingdale Rd. When was the debt incurred? 3/2015 Glendale Heights, IL 60139 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify loan 4.9 City of Chicago Last 4 digits of account number 0950,9440 \$160.00 Nonpriority Creditor's Name **Bureau of Parking** When was the debt incurred? 2015 121 N La Salle St RM 107 A Chicago, IL 60602 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Other. Specify tickets/fines ☐ Yes 4.1 Comcast 1564 \$327.00 Last 4 digits of account number 0 Nonpriority Creditor's Name PO Box 3002 2015 When was the debt incurred? Southeastern, PA 19398 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Utility

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 24 of 64

1 Christina Cappello		Case number (if know)	
Comenity Bank/NY&CO	Last 4 digits of account number	5634	\$1,238
Nonpriority Creditor's Name PO BOX 182273	When was the debt incurred?	2015	. ,
Columbus, OH 43218-2273			
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other Specify Credit Card		
Credit Bureau Centre	Last 4 digits of account number	4190	\$0
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ0
PO Box 273	When was the debt incurred?	2015	
Monroe, WI 53566-0273 Number Street City State Zlp Code	As of the date you file, the claim	is: Chack all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	в. Спеск ан так арру	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Notice Onl	/	
Credit Management	Last 4 digits of account number	4240	\$263
Nonpriority Creditor's Name	_		<u> </u>
Attention: Bankruptcy Dept Po Box 118288	When was the debt incurred?	Opened 6/01/15	
Carrollton, TX 75011 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	,	,	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify Collection	Attorney Comcast-Chicago	

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 25 of 64

Jepto	or 1 Christina Cappello		Case number (if know)				
.1	Dupage County Circuit Court Clerk	Last 4 digits of account number	T646	\$0.00			
	Nonpriority Creditor's Name 505 N County Farm Rd. Wheaton, IL 60189	When was the debt incurred?	2015				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify fines					
.1	DuPage Medical Group Nonpriority Creditor's Name	Last 4 digits of account number	4165	\$934.00			
	15921 Collections Center Dr. Chicago, IL 60693-0159	When was the debt incurred?	2015				
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	<u></u>	Type of NONPRIORITY unsecured claim:				
	Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin					
	Yes	Other. Specify Medical Bil	<u>ls</u>				
.1	First Source Advantage	Last 4 digits of account number	6279	\$0.00			
	Nonpriority Creditor's Name 205 Bryant Woods South	When was the debt incurred?	2015				
	Buffalo, NY 14228 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	• ,					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	□ Debtor 2 only □ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	·					
	\square At least one of the debtors and another						
	Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	□ Yes	■ Other Specify Notice Only					

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 26 of 64

Debtor 1 Christina Cappello Case number (if know) Glendale Heights Police 4.1 00BC \$120.00 Department Last 4 digits of account number Nonpriority Creditor's Name 300 Civic Center Plaza When was the debt incurred? 2015 Glendale Heights, IL 60139 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify tickets 4.1 **Gottleib Memorial Hospital** 2912 \$2,176.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 701 W. North Ave. When was the debt incurred? 2014 Melrose Park, IL 60160 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed lacksquare At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bills ☐ Yes 4.1 8397 \$286.40 Illinois Tollway Last 4 digits of account number Nonpriority Creditor's Name **ATTN: Violation Administration** 2015 When was the debt incurred? Cent 2700 Ogden Ave. **Downers Grove, IL 60515** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Tollway violations

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 27 of 64
Case number (if know)

1 Christina Cappello	Case number (if know)			
Mcsi Inc	Last 4 digits of account number 4379	\$50.		
Nonpriority Creditor's Name Po Box 327				
Palos Heights, IL 60463	When was the debt incurred? 14			
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.				
■ Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
□ Yes	■ Other. Specify 01 Village Of Stone Park			
	· · ·			
Mcsi Inc	Last 4 digits of account number 3374	\$42.		
Nonpriority Creditor's Name	When we the debt in word 2			
Po Box 327 Palos Heights, IL 60463	When was the debt incurred? 14			
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt	\square Obligations arising out of a separation agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims			
No	\square Debts to pension or profit-sharing plans, and other similar debts			
Yes	■ Other. Specify 01 Village Of Stone Park			
	Last 4 digits of account number 9653	***		
midland credit management Nonpriority Creditor's Name	Last 4 digits of account number 9653	\$0.		
PO Box 60578	When was the debt incurred? 2016			
Los Angeles, CA 90060-0578				
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.	_			
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims			
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
☐Yes	■ Other. Specify Notice Only			
⊔ Yes	Other. Specify Notice Only			

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 28 of 64
Case number (if know)

Deni	On Christina Cappello		Case Humber (II know)				
4.2 3	Penn Credit	Last 4 digits of account number	1864	\$0.00			
	Nonpriority Creditor's Name 220 Hickory St.	When was the debt incurred?	2015				
	Warren, PA 16365 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Notice Only	<u> </u>				
4.2 4	Personal Finance/p312	Last 4 digits of account number	5301	\$2,180.37			
	Nonpriority Creditor's Name	_					
	1022 S. Mclean Blvd Elgin, IL 60123	When was the debt incurred?	Opened 4/01/13 Last Active 2/20/15				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only						
	Debtor 1 and Debtor 2 only	only Disputed					
	☐ At least one of the debtors and another	least one of the debtors and another Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	mmunity					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims					
	No	Debts to pension or profit-sharing					
	Yes	Other. Specify Collection					
4.2 5	Pierce & Associates	Last 4 digits of account number	0853	\$0.00			
	Nonpriority Creditor's Name One North Dearborn Suite 1300	When was the debt incurred?	2015				
	Chicago, IL 60602	_					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	_						
	■ Debtor 1 only						
	☐ Debtor 2 only	Debtor 1 and Debtor 2 only					
	•	Type of NONPRIORITY unsecure					
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Student loans					
	debt	☐ Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims	and the state of t				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	Other, Specify Notice Only	/				

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 29 of 64
Case number (if know)

Christina Cappello		Case Humber (II know)					
Portfolio Recovery	Last 4 digits of account number	7385	\$0.00				
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541	When was the debt incurred?	Opened 5/01/15					
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply					
■ Debtor 1 only	☐ Contingent						
Debtor 2 only	☐ Unliquidated						
☐ Debtor 1 and Debtor 2 only	☐ Disputed						
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:					
☐ Check if this claim is for a community	☐ Student loans						
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not					
■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts					
Yes	Other. Specify Notice Only	<u>, </u>					
Public Storage	Last 4 digits of account number	6674	\$106.00				
Nonpriority Creditor's Name 8790 Golf Rd DesPlaines, IL 60016	When was the debt incurred?	2015					
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply					
■ Debtor 1 only	☐ Contingent						
☐ Debtor 2 only	☐ Unliquidated						
☐ Debtor 1 and Debtor 2 only	☐ Disputed						
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
☐ Check if this claim is for a community debt							
Is the claim subject to offset?							
■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
Yes	Other. Specify Collection of	on account					
Rodale Books	Last 4 digits of account number	6627	\$34.75				
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ04.70				
400 S 10th St.	When was the debt incurred?	2015					
Emmaus, PA 18098 Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply					
Who incurred the debt? Check one.	,						
Debtor 1 only	☐ Contingent						
Debtor 2 only	☐ Unliquidated						
☐ Debtor 1 and Debtor 2 only	☐ Disputed						
\square At least one of the debtors and another	Type of NONPRIORITY unsecured						
☐ Check if this claim is for a community	Student loans						
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims						
No	Debts to pension or profit-sharing						
□ Yes	■ Other Specify Collection of						
— 153	Otner. Specify	account					

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 30 of 64

Debtor 1 Christina Cappello Case number (if know) 4.2 \$40.00 Sonnenschein Fnl Svcs 7419 Last 4 digits of account number 9 Nonpriority Creditor's Name 2 Transam Plaza Dr Ste 3 When was the debt incurred? Opened 8/01/11 Oakbrook Terrace, IL 60181 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other, Specify Collection Attorney Village Of Stone Park ☐ Yes 4.3 51C2 Stoneberry \$149.85 Last 4 digits of account number 0 Nonpriority Creditor's Name PO Box 2820 When was the debt incurred? 2015 Monroe, WI 53566-8020 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection on account ☐ Yes 4.3 5681 \$3,486.00 Synchrony Bank/Amazon Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 11/01/12 Last Active Po Box 103104 When was the debt incurred? 1/20/15 Roswell, GA 30076 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 31 of 64

Debtor 1 Christina Cappello Case number (if know) 4.3 \$2,492.00 Synchrony Bank/Lowes 7385 Last 4 digits of account number 2 Nonpriority Creditor's Name PO BOX 965064 2015 When was the debt incurred? Orlando, FL 32896-5064 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.3 4802 Synchrony Bank/Walmart \$2,270.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 8/01/10 Last Active Po Box 103104 When was the debt incurred? 1/04/15 Roswell, GA 30076 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account 4.3 **UHaul** 3200,6260 \$59.60 Last 4 digits of account number Nonpriority Creditor's Name PO Box 21501 When was the debt incurred? 2015 Phoenix, AZ 85004 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection on account ☐ Yes

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 32 of 64

Depto	Christina Cappello		Case number (if know)			
.3	Vengroff, Williams & Associates Nonpriority Creditor's Name	Last 4 digits of account number	3200	\$0.00		
	PO Box 4155	When was the debt incurred?	2015			
	Sarasota, FL 34230-4155 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply			
	Who incurred the debt? Check one.	•				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Notice Only	<u>/</u>			
.3	Village of Carol Stream	Last 4 digits of account number	1864	\$40.00		
	Nonpriority Creditor's Name 500 N. Gary Ave.	When was the debt incurred?	2015			
	Carol Stream, IL 60188		2010			
	Number Street City State Zlp Code	As of the date you file, the claim i	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	_				
	Debtor 1 only	Contingent				
	Debtor 2 only	☐ Unliquidated☐ Disputed				
	☐ Debtor 1 and Debtor 2 only					
	\square At least one of the debtors and another	<u></u> '	Type of NONPRIORITY unsecured claim:			
	Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims				
	No	g plans, and other similar debts				
	□ Yes	Other. Specify tickets				
.3	Village of Glendale Heights	Last 4 digits of account number	6434	\$130.00		
	Nonpriority Creditor's Name					
	300 Civic Center Plaza	When was the debt incurred?	2015			
	Glendale Heights, IL 60139-2691 Number Street City State Zlp Code	As of the date you file, the claim i	is: Chack all that apply			
	Who incurred the debt? Check one.	As of the date you file, the claim	з. Спеск ан так арріу			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only ☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only ☐ Disputed					
	•	At least one of the debtors and another Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes ☐ Other. Specify tickets					
		- Culoi. Opcomy				

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 33 of 64

Debtor 1 Christina Cappello Case number (if know) 4.3 \$200.00 Village of Melrose Park **GRYF** Last 4 digits of account number 8 Nonpriority Creditor's Name PO BOX 7722 When was the debt incurred? 2015 Carol Stream, IL 60197-7722 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Parking Tickets ☐ Yes 4.3 **SWRV** Village of stone Park \$200.00 Last 4 digits of account number 9 Nonpriority Creditor's Name PO BOX 7725 When was the debt incurred? 2015 Carol Stream, IL 60197-7725 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify ticket 4.4 Village of Villa Park 5495 \$100.00 Last 4 digits of account number 0 Nonpriority Creditor's Name **Photo Enforcement Program** 2015 When was the debt incurred? 75 Remittance Dr. Suite 6658 Chicago, IL 60675-6658 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify tickets

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 34 of 64

Christina Cappello		Case number (ii know)			
Webbank/fingerhut	Last 4 digits of account number	0292,4459	\$2,776.00		
Nonpriority Creditor's Name		Opened 11/01/11 Lest Active			
6250 Ridgewood Roa Saint Cloud, MN 56303	When was the debt incurred?	Opened 11/01/11 Last Active 1/04/15			
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
Yes	■ Other. Specify Charge Acc	count			
Winfield Labratory Consultants	Last 4 digits of account number	4644	\$145.00		
Nonpriority Creditor's Name			VIII.000		
Dept 4408	When was the debt incurred?	2016			
Carol Stream, IL 60122-4408 Number Street City State Zlp Code	As of the date you file, the claim i	s. Check all that apply			
Who incurred the debt? Check one.	As of the date you me, the claim	S. Officer all that apply			
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	□ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt		ration agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims				
■ No	Debts to pension or profit-sharing				
Yes	Other. Specify Medical Bil	ls			
Winfield Radiology Consultants	Last 4 digits of account number	9956	\$43.00		
Nonpriority Creditor's Name					
6910 S Madison St Willowbrook, IL 60527	When was the debt incurred?	2015			
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
Who incurred the debt? Check one.					
■ Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt		ration agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims				
■ No	☐ Debts to pension or profit-sharin	•			
□ Yes	Other. Specify Medical Bills				

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Page 35 of 64 Case number (if know) Document

Debtor 1 Christina Cappello

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				1	Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	23,201.05
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	23,201.05

Page 36 of 64 Document Fill in this information to identify your case: Debtor 1 **Christina Cappello** First Name Middle Name Last Name Debtor 2 First Name Middle Name (Spouse if, filing) Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

I	Person or	company with	n whom you have the or, Street, City, State and ZIP Co	contract or lease	State what the contract or lease is for
2.1					
	Name				-
	Name				
	Number	Street			
	City		State	ZIP Code	-
2.2					
	Name				_
	Name				
	Number	Street			_
	City		State	ZIP Code	_
0.0	City		State	ZIF Code	
2.3					_
	Name				
	Number	Street			_
	Number	Sireei			
				710.0	_
	City		State	ZIP Code	
2.4					
	Name				_
					_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				_
	1401110				
	Number	Street			_
	City		State	ZIP Code	_
	y				

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main

Fill in this	information to identify yo	Docume	nt Page 37 d	of 64	
Debtor 1	Christina Capp First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the	NORTHERN DISTRICT	OF ILLINOIS		
Case numb (if known)	per			_	neck if this is an nended filing
	Form 106H				
Sched	ule H: Your Co	debtors			12/15
Arizona No.	nin the last 8 years, have y a, California, Idaho, Louisian Go to line 3.	vou lived in a community pr na, Nevada, New Mexico, Pu pouse, or legal equivalent live	erto Rico, Texas, Wash	ry? (Community property states and to ington, and Wisconsin.)	<i>erritorie</i> s include
in line Form 1 out Co	2 again as a codebtor onl	ly if that person is a guaran cial Form 106E/F), or Sched	tor or cosigner. Make	rif your spouse is filing with you. L sure you have listed the creditor or 16G). Use Schedule D, Schedule E/F Column 2: The creditor to who Check all schedules that apply:	n Schedule D (Official F, or Schedule G to fill
				_	
[3.1]	Name			U Schedule D, line	_
				☐ Schedule E/F, line	
-	Number Ctreet				_
	Number Street City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	_
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 38 of 64

Fill	in this information to identi	fy your ca	se.				1			
		stina Ca								
_	btor 2 Duse, if filing)					_				
Uni	ited States Bankruptcy Cou	urt for the:	NORTHERN DISTRIC	T OF ILLINOIS		_				
(If kr	se number						Check if this is An amende A supplem 13 income	ed filing ent showin	g postpetition	
	fficial Form 106 chedule I: You	_					MM / DD/ `	YYYY		
Be a sup spo atta	as complete and accurate plying correct informatio use. If you are separated ch a separate sheet to the tale. Describe Emple	as poss n. If you a and you is form. (ible. If two married peo are married and not filir r spouse is not filing wi	ng jointly, and your th you, do not inclu	spouse i	s liv nati	ing with you, incl on about your sp	ude inforr ouse. If m	nation about ore space is	your needed,
1.	Fill in your employment information.	t		Debtor 1			Debtor	2 or non-fi	ling spouse	
	If you have more than on attach a separate page w information about additio employers.	vith	Employment status	■ Employed □ Not employed			☐ Empl	oyed		
	Include part-time, seasor self-employed work.	nal, or	Occupation Employer's name	RN Center of IL Ho	me					
	Occupation may include or homemaker, if it applies		Employer's address	855 E Golf Rd. Arlington Heigh			5			
			How long employed the	nere? 6 mont	ths					
Esti spoi	Give Details About 2:	of the dated. ted. have mo	te you file this form. If y	· · · · ·	·	•		·	·	J
	o opuso, anasii a soparat						For Debtor 1		btor 2 or ng spouse	
2.	List monthly gross wag deductions). If not paid r		• •	, ,	2.	\$	866.67	\$	N/A	
3.	Estimate and list month	nly overti	me pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income	Add lin	e 2 + line 3.		4.	\$	866.67	\$	N/A	

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 39 of 64

Deb	tor 1	Christina Cappello	_	Ca	ase number (<i>if kr</i>	nown)				
					For Debtor 1		no	r Debtor n-filing s	pouse	
	Cop	by line 4 here	4.	5	866	5.67	\$_		N/A	
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	. 9	85	5.63	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b	. 9	6	0.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c.		·	0.00	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d			0.00	\$_		N/A	
	5e.	Insurance	5e			0.00	\$_		N/A	
	5f. 5g.	Domestic support obligations Union dues	5f. 5g).00).00	\$_ \$		N/A N/A	
	5y. 5h.	Other deductions. Specify:	5h			0.00	+ \$		N/A	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.	\$	·	5.63	\$		N/A	
			7.	Ţ			Ψ_ \$			
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	781	.04	Φ_		N/A	
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a			0.00	\$_		N/A	
	8b.	Interest and dividends	8b	. 9	§ C	0.00	\$_		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	. (0.00	\$		N/A	
	8d.		8d			0.00	\$-		N/A	
	8e.	Social Security	8e			0.00	\$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.			0.00	\$_		N/A	
	8g.	Pension or retirement income	8g			0.00	\$_		N/A	
	8h.	Other monthly income. Specify:	8h	.+ \$		0.00	+ 5_		N/A	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	(0.00	\$_		N/A	
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	781.04	+ \$		N/A	= \$	781.04
	Add	I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.								
11.	11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00									
12.		If the amount in the last column of line 10 to the amount in line 11. The rest te that amount on the Summary of Schedules and Statistical Summary of Certaillies						e. 12.	\$Combine	781.04
13.		you expect an increase or decrease within the year after you file this form	?						monthly	
	П	Yes, Explain:								

Official Form 106I Schedule I: Your Income page 2

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 40 of 64

Fill	n this information to identify	your case:					
Debt	tor 1 Christina C	Cappello			Che	eck if this is: An amended filing	
Debt	tor 2						wing postpetition chapter the following date:
` .	ed States Bankruptcy Court for t	ho: NODTL	JEDNI DISTRICT OF ILLI IN	OIS.		MM / DD / YYYY	
	. ,	ne. NORTE	TERN DISTRICT OF ILLIN	013		IVIIVI / DD / TTTT	
	e number nown)						
	ficial Form 106J						
	chedule J: Your			a filipa tagathar b	ath are are	vally recognished for	12/15
info	as complete and accurate ormation. If more space is i nber (if known). Answer ev	needed, atta	ch another sheet to this				
Part	Describe Your Hou Is this a joint case?	sehold					
1.	No. Go to line 2.						
	Yes. Does Debtor 2 liv	e in a separ	ate household?				
	□ No						
	☐ Yes. Debtor 2 m	ust file Offic	ial Form 106J-2, Expenses	for Separate House	ehold of Del	btor 2.	
2.	Do you have dependents	? ■ No					
	Do not list Debtor 1 and Debtor 2.	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state the						□ No
	dependents names.						□ Yes □ No
							☐ Yes
							□ No
							☐ Yes ☐ No
							☐ Yes
3.	Do your expenses includ		No			_	
	expenses of people other yourself and your depend		Yes				
Part	2: Estimate Your Ong	oina Month	lv Expenses				
Esti exp	imate your expenses as of enses as of a date after the licable date.	your bankr	uptcy filing date unless y	ou are using this followed are using the following the second sec	orm as a s J, check t	upplement in a Cha	apter 13 case to report of the form and fill in the
the	ude expenses paid for wit value of such assistance a icial Form 106l.)					Your exp	enses
(0	,						
4.	The rental or home owne payments and any rent for			nclude first mortgag	e 4.	\$	1,500.00
	If not included in line 4:						
	4a. Real estate taxes				4a.	·	0.00
	4b. Property, homeowne				4b.	·	0.00
	4c. Home maintenance,4d. Homeowner's assoc				4c. 4d.		0.00
5.	Additional mortgage pay			me equity loans	4u. 5.	·	0.00

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 41 of 64

Debtor	Christina Cappello	Case num	ber (if known)	
6. U	tilities:			
6. 6		6a.	\$	150.00
6k		6b.		100.00
60		6c.		250.00
60		6d.		0.00
-	ood and housekeeping supplies	7.	\$	400.00
	hildcare and children's education costs	8.	\$	0.00
		o. 9.	·	
	lothing, laundry, and dry cleaning			50.00
	ersonal care products and services	10.	·	100.00
	ledical and dental expenses	11.	\$	20.00
	ransportation. Include gas, maintenance, bus or train fare.	12.	\$	200.00
	o not include car payments. ntertainment, clubs, recreation, newspapers, magazines, and books	13.	· -	20.00
	haritable contributions and religious donations	14.	\$	20.00
		14.	Ψ	20.00
	nsurance. o not include insurance deducted from your pay or included in lines 4 or 20.			
	5a. Life insurance	15a.	\$	0.00
	5b. Health insurance	15b.	·	0.00
	5c. Vehicle insurance	15b.	•	90.00
	5d. Other insurance. Specify:	15d.		
	·	130.	Φ	0.00
_	axes. Do not include taxes deducted from your pay or included in lines 4 or 20. pecify:	16.	\$	0.00
	estallment or lease payments:		Ψ	0.00
	7a. Car payments for Vehicle 1	17a.	\$	375.00
	7b. Car payments for Vehicle 2	17a. 17b.		0.00
	7c. Other. Specify:	17b.	·	
			*	0.00
	7d. Other. Specify:	17d.	Ф	0.00
	our payments of alimony, maintenance, and support that you did not report a educted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I		\$	0.00
	ther payments you make to support others who do not live with you.		\$	0.00
	pecify:	19.		0.00
	ther real property expenses not included in lines 4 or 5 of this form or on <i>Sc</i>		ur Income	
	Oa. Mortgages on other property	20a.		0.00
	Ob. Real estate taxes	20b.		0.00
	Oc. Property, homeowner's, or renter's insurance	20c.	·	0.00
	Od. Maintenance, repair, and upkeep expenses	20d.	·	0.00
	Oe. Homeowner's association or condominium dues	20d. 20e.		0.00
			· ·	
1. O	ther: Specify:	21.	-φ	0.00
2. C	alculate your monthly expenses			
	2a. Add lines 4 through 21.		\$	3,275.00
	2b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	2	\$, <u></u>
	2c. Add line 22a and 22b. The result is your monthly expenses.		\$	3,275.00
~4	25. Add and 220. The result is your monthly expenses.			3,213.00
3. C	alculate your monthly net income.			
23	3a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	781.04
23	3b. Copy your monthly expenses from line 22c above.	23b.	-\$	3,275.00
	•			,
23	3c. Subtract your monthly expenses from your monthly income.			0.400.00
	The result is your monthly net income.	23c.	\$	-2,493.96
	o you expect an increase or decrease in your expenses within the year after			
	or example, do you expect to finish paying for your car loan within the year or do you expect your diffication to the terms of your mortgage?	our mortgage p	payment to incre	ase or decrease because o
_	_			
	No.			
	1 Yes Explain here:			

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 42 of 64

Fill in this inform					
Fill in this infor	mation to identify your	case:			
Debtor 1	Christina Cappell		Lost Nama		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
Helical Otatas Ba	and an art to a O a control of a filter	NODTHERN DICTRICT	OF ILLINOIS		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Che	eck if this is an
				am	ended filing
Official Form	m 106Daa				
Official Forn	-				
Declarat	tion About a	ın Individual	Debtor's Scl	hedules	12/15
obtaining money years, or both. 1		n connection with a bank		Making a false statement, conceant ines up to \$250,000, or imprisor	
Sigi	II below				
Did you pa	y or agree to pay some	one who is NOT an attor	ney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes. N	Name of person			Attach Bankruptcy Petition	
				Declaration, and Signature	e (Official Form 119)
	ilty of perjury, I declare e true and correct.	that I have read the sum	mary and schedules filed	l with this declaration and	
Y /e/ Chr	istina Cappello		Х		
	ina Cappello		Signature of D	Debtor 2	
	re of Debtor 1		- 3		
Data •	March 21, 2016		Date		
Date _	March 31, 2016		Date		

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 43 of 64

Fil	l in this inform	ation to identify you	case:				
De	btor 1	Christina Cappe	Middle Name		Last Name		
De	ebtor 2	riistivaine	Middle Name		Lastivaine		
(Sp	ouse if, filing)	First Name	Middle Name		Last Name		
Un	ited States Ban	kruptcy Court for the:	NORTHERN DIS	TRICT OF ILL	INOIS		
-	nse number					-	Check if this is an mended filing
St		of Financial			ls Filing for B		12/15
info	ormation. If mo		attach a separate s			equally responsible for sup additional pages, write you	
Pa	rt 1: Give De	etails About Your Ma	rital Status and Wh	ere You Live	d Before		
1.	What is your	current marital statu	s?				
	☐ Married■ Not marr	ied					
2.	During the la	st 3 years, have you	lived anywhere oth	er than where	e you live now?		
	■ No □ Yes. List	all of the places you li	ved in the last 3 yea	rs. Do not incl	ude where you live now	·.	
	Debtor 1 Pri	or Address:	Dates D		Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat						ity property state or territory co, Texas, Washington and W	
	■ No □ Yes. Mak	ke sure you fill out <i>Sch</i>	nedule H: Your Code	btors (Official	Form 106H).		
Pa	rt 2 Explain	the Sources of You	r Income				
4.	Fill in the total	amount of income yo	u received from all jo	bs and all bus	usiness during this yes sinesses, including part- ether, list it only once un		ndar years?
	□ No	: 4b 1-4 11					
	■ Yes. Fill	in the details.					
			Debtor 1			Debtor 2	
			Sources of income Check all that apply	/. (be	oss income efore deductions and clusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	■ Wages, commis bonuses, tips	sions,	\$1,485.12	☐ Wages, commissions, bonuses, tips	
			☐ Operating a bus	iness		☐ Operating a business	

Official Form 107

Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Case 16-11060 Document

Page 44 of 64 Case number (if known) Debtor 1 Christina Cappello

			De	ebtor 1		Debtor 2	
				ources of income	Gross income	Sources of inco	ome Gross income
	For last calendar year: (January 1 to December 31, 2015)		Cl	heck all that apply.	(before deductions ar exclusions)	d Check all that ap	ply. (before deductions and exclusions)
				Wages, commissions, onuses, tips	\$44,414.0	00 ☐ Wages, common bonuses, tips	nissions,
				Operating a business		☐ Operating a b	usiness
				l Wages, commissions, onuses, tips	\$4,000.0	00 ☐ Wages, common bonuses, tips	nissions,
				Operating a business		☐ Operating a b	usiness
		dar year be December	31 2014 \	Wages, commissions, onuses, tips	\$35,119.0	00 ☐ Wages, common bonuses, tips	nissions,
				Operating a business		☐ Operating a b	usiness
				l Wages, commissions, onuses, tips	\$3,500.0	00 ☐ Wages, common bonuses, tips	nissions,
				Operating a business		☐ Operating a b	usiness
	■ No	Fill in the de	-	from each source separat			
			De	ebtor 1		Debtor 2	
				ources of income escribe below	Gross income (before deductions ar exclusions)	Sources of inco d Describe below.	Gross income (before deductions and exclusions)
Par	t 3: List	Certain Pa	nyments You Ma	de Before You Filed for	Bankruptcy		
6.		Neither D	ebtor 1 nor Debt	ebts primarily consumer or 2 has primarily consu rsonal, family, or househol	mer debts. Consumer o	lebts are defined in 11 l	J.S.C. § 101(8) as "incurred by an
		During the	90 days before y	ou filed for bankruptcy, di	d you pay any creditor a	total of \$6,225* or more	e?
		□ No.	Go to line 7.				
		□ Yes	paid that credite not include pay	or. Do not include payment ments to an attorney for the	ts for domestic support on the standard	obligations, such as chil	nents and the total amount you ld support and alimony. Also, do
		* Subject	to adjustment on	4/01/16 and every 3 years	s after that for cases filed	I on or after the date of	adjustment.
	Yes.			oth have primarily consurou filed for bankruptcy, di		total of \$600 or more?	
		■ No.	Go to line 7.				
		□ Yes	List below each include paymer				ou paid that creditor. Do not lso, do not include payments to an
	Craditor	s Name an	d Address	Dates of payme	nt Total amoun	Amount you	Was this payment for

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 45 of 64 Debtor 1 Christina Cappello Case number (if known) Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimonv. Nο Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Total amount Insider's Name and Address** Dates of payment Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number People v Debtor 2015-DT-646 DUI **Dupage** □ Pending 2015-DT-646 □ On appeal Concluded Stearns Lending (LoanCare) v **Foreclosure DuPage** Pending Debtor 15-CH-000853 □ On appeal 15-CH-000853 ☐ Concluded Webbank/fingerhut Collection **Dupage County Circuit** Pending

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.

Court Clerk

505 N County Farm Rd.

Wheaton, IL 60189

No

15SC4459

Yes. Fill in the information below.

Creditor Name and Address

Describe the Property

Explain what happened

Date

Value of the property

Explain what happened

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

No

Yes. Fill in the details.

Creditor Name and Address Describe the action the creditor took Date action was taken

□ On appeal

□ Concluded

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 46 of 64 Debtor 1 Christina Cappello Case number (if known) 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity ■ No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of transferred or transfer was Address payment Email or website address made Person Who Made the Payment, if Not You \$1,500.00 Leeders & Associates **Attorney Fees** 2015 205 W. Randolph St.

Suite 1240 Chicago, IL 60606 tleeders@leederslaw.com Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 47 of 64

Debtor 1 Christina Cappello Case number (if known) 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Date payment Person Who Was Paid Description and value of any property Amount of **Address** transferred or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Nο Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or Date transfer was property transferred payments received or debts Address made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Last balance Type of account or Date account was Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or Code) moved, or transfer transferred Chase XXXX-9618 negative \$422.35 \$422.35 Checking PO BOX 659754 closed June 2015 □ Savings San Antonio, TX 78265 ☐ Money Market □ Brokerage □ Other 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still

Address (Number, Street, City,

State and ZIP Code)

Address (Number, Street, City, State and ZIP Code)

have it?

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Page 48 of 64 Case number (if known) Document

Debtor 1 Christina Cappello

22.	Have you stored property in a storage unit or pla	nce other than your home within 1	year before you filed for bankruptcy	
	No			
	Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	19: Identify Property You Hold or Control for S	Someone Else		
23.	Do you hold or control any property that someon for someone.	ne else owns? Include any proper	ty you borrowed from, are storing for	, or hold in trust
	■ No			
	Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	10: Give Details About Environmental Informa	tion		
For	he purpose of Part 10, the following definitions a	apply:		
	Environmental law means any federal, state, or letoxic substances, wastes, or material into the air regulations controlling the cleanup of these sub	r, land, soil, surface water, ground stances, wastes, or material.	dwater, or other medium, including st	atutes or
_	Site means any location, facility, or property as of to own, operate, or utilize it, including disposal s	-	law, whether you now own, operate, o	or utilize it or used
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s		s waste, hazardous substance, toxic s	ubstance,
Rep	ort all notices, releases, and proceedings that yo	u know about, regardless of wher	n they occurred.	
24.	Has any governmental unit notified you that you	may be liable or potentially liable	under or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.			
		Covernmental unit	Environmental law if you	Data of nation
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	No			
	Yes. Fill in the details.	0	Facility and the state of the s	Data of matica
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or administ	trative proceeding under any envi	ronmental law? Include settlements a	ind orders.
	■ No □ Yes. Fill in the details.			
	Case Title	Court or agency	Nature of the case	Status of the
	Case Number	Name Address (Number, Street, City, State and ZIP Code)		case
Par	11: Give Details About Your Business or Conr	nections to Any Business		
27.	Within 4 years before you filed for bankruptcy, d	id you own a business or have an	y of the following connections to any	business?
	☐ A sole proprietor or self-employed in a tr	rade, profession, or other activity,	either full-time or part-time	
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLP)	

Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Case 16-11060 Desc Main Page 49 of 64 Case number (if known) Document

Debtor 1 Christina Cappello

(Number, Street, City, State and ZIP Code)

28.

	☐ A partner in a partnership						
	☐ An officer, director, or managing ex	ecutive of a corporation					
	☐ An owner of at least 5% of the voting	g or equity securities of a corporation					
	No. None of the above applies. Go to F	Part 12.					
	Yes. Check all that apply above and fill	in the details below for each business.					
Business Name Address (Number, Street, City, State and ZIP Code)		Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed				
	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.						
	No Yes. Fill in the details below.						
	me dress	Date Issued					

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Page 50 of 64 Case number (if known) Document

Debtor 1 Christina Cappello

Part 12: Sign Below		
are true and correct. I understand that	ent of Financial Affairs and any attachments, and I demaking a false statement, concealing property, or object up to \$250,000, or imprisonment for up to 20 year	taining money or property by fraud in connection
/s/ Christina Cappello		
Christina Cappello	Signature of Debtor 2	
Signature of Debtor 1		
Date March 31, 2016	Date	
Did you attach additional pages to You	r Statement of Financial Affairs for Individuals Filing	for Bankruptcy (Official Form 107)?
■ No		
☐ Yes		
Did you pay or agree to pay someone v	who is not an attorney to help you fill out bankruptcy	forms?
■ No		
☐ Yes. Name of Person . Attach th	ne Bankruptcy Petition Preparer's Notice, Declaration, an	nd Signature (Official Form 119).

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 51 of 64

Fill in this inform	nation to identify your case:		
Debtor 1	Christina Cappello		
Debtor 2	First Name Middle Name	Last Name	
(Spouse if, filing)	First Name Middle Name	Last Name	
United States Bar	nkruptcy Court for the: NORTHERN DI	STRICT OF ILLINOIS	
Case number			
(if known)			☐ Check if this is an
			amended filing
O#:=:=! -	100		
Official For		videnda Filima Handan Obrast	7
Statemen	it of intention for inai	viduals Filing Under Chapto	er / 12/15
If you are an indi	vidual filing under chapter 7, you must t	fill out this form if:	
creditors have	claims secured by your property, or		
	ed personal property and the lease has	not expired. er you file your bankruptcy petition or by the date s	at for the meeting of araditors
whiche	ver is earlier, unless the court extends t	the time for cause. You must also send copies to the	e creditors and lessors you list
on the f	orm		
	ople are filing together in a joint case, k d date the form.	oth are equally responsible for supplying correct in	nformation. Both debtors must
		is needed, attach a separate sheet to this form. On	the top of any additional pages,
write yo	our name and case number (if known).		
Part 1: List Yo	our Creditors Who Have Secured Claims		
		D: Creditors Who Have Claims Secured by Property	y (Official Form 106D), fill in the
information be Identify the cre	low. editor and the property that is collateral	What do you intend to do with the property tha	t Did you claim the property
		secures a debt?	as exempt on Schedule C?
	itizens Bank	☐ Surrender the property.	□ No
name:		Retain the property and redeem it.Retain the property and enter into a	■ Yes
·	2014 Mazda Mazda 3	Reaffirmation Agreement.	_ 100
property	44,000miles miles Lien held by Citizens Finance,	☐ Retain the property and [explain]:	
securing debt:	value from Nadaguides.com		_
	pancare Servicing Ctr	Surrender the property.	□ No
name:		☐ Retain the property and redeem it. ☐ Retain the property and enter into a	■ Yes
Description of	951 Dearborn Circle Carol	Retain the property and enter into a Reaffirmation Agreement.	
property	Stream, IL 60188 DuPage	☐ Retain the property and [explain]:	
securing debt:	County value from Zillow.com, will		
	surrender		_

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Official Form 108

Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 52 of 64

Debto	or 1	Christina Cappello	Case number (if known)	
Descr	ribe y	your unexpired personal property leases		Will the lease be assumed?
Lesso Descr Prope	riptior	ame: n of leased		□ No □ Yes
Lesso Descr Prope	riptior	ame: n of leased		□ No □ Yes
Lesso Descr Prope	riptior	ame: n of leased		□ No □ Yes
Lesso Descr Prope	riptior	ame: n of leased		□ No □ Yes
Lesso Descr Prope	riptior	ame: n of leased		□ No □ Yes
Lesso Descr Prope	riptior	ame: n of leased		□ No □ Yes
Lesso Descr Prope	riptior	ame: n of leased		□ No □ Yes
Part 3 Under proper	pen	Sign Below alty of perjury, I declare that I have indicated my intention about any nat is subject to an unexpired lease.	property of my estate that se	cures a debt and any personal
(Chris	Stina Cappello Stina Cappello Signature of Debtor 1	nature of Debtor 2	
	Date	March 31, 2016 Date		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:
http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-11060 Doc 1 Filed 03/31/16 Entered 03/31/16 11:30:36 Desc Main Document Page 57 of 64

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In r	e Christina Cappello		Case N	Vo.	
		Debtor(s)	Chapte	er 7	
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR	DEBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy	y, or agreed to be p	oaid to me, for ser	
	For legal services, I have agreed to accept		\$	1,500.0	<u>0</u>
	Prior to the filing of this statement I have received		\$	1,500.0	0_
	Balance Due		\$	0.0	<u>0</u>
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compe	ensation with any other person	n unless they are m	nembers and associ	ciates of my law firm.
	☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name				of my law firm. A
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
	 a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of creditor d. [Other provisions as needed] Exemption planning; 	ment of affairs and plan which	h may be required	;	
6.	By agreement with the debtor(s), the above-disclosed fee Representation of chapter 7 debtors for a Dischargeability actions /adversary actions. Judicial lien avoidances; c. Relief from automatic stay actions; d. Avoidance of liens pursuant to 11 USC e. Secured debt redemption motions; f. Any other adversary proceedings.	any of the following: tions;			
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any bankruptcy proceeding.	agreement or arrangement for	or payment to me f	or representation	of the debtor(s) in
ı	March 31, 2016	/s/ Terrance S. L	.eeders		
_	Date	Terrance S. Lee	ders 6244638		
		Signature of Attorr Leeders & Asso			
		205 W. Randolp			
		Suite 1240	ne		
		Chicago, IL 6060 312-346-7400 F		1	

tleeders@leederslaw.com

Name of law firm

CHAPTER 7 BANKRUPTCY CONTRACT DISECURED DEBTS NON-DISCHARGEABLE DEBTS SECURED DEBTS 1st Mortgage /Arrears Taxes 2nd Mortgage /Arrears Student Loans Automobile #1 **Child Support** Automobile #2 NSF **PMSI** Parking Tickets Non-PMSI Overpay Gov't. Debt Other Other TOTA TOTAL TOTAL Garnishment (Y/N) Cosigned debt (Y/N) Bank Account Setoff (Y/N) IRS Determination (Y/N) License suspended (Y/N) Wage assignment (Y/N) Motion to avoid lien (Y/N) Judgment lien motion (Y/N) 722 Redemption (Y/N) ALL PAYMENTS ARE TO BE MADE PAYABLE TO "LEEDERS & ASSOCIATES" THE FEE BELOW DOES NOT INCLUDE FEES FOR MANDATORY CREDIT COUNSELING OR DEBTOR EDUCATION REQUIREMENTS; THIRD PARTY FEES FOR APPRAISALS, CREDIT REPORTS, TAX TRANSCRIPTS, TITLE SEARCHES, AND OTHER REQUIRED DUE DILLIGENCE REQUIREMENTS. FILING FEE IS A SEPARATE FEE FROM THE ATTORNEYS FEES, AND MUST BE PAID BEFORE CASE IS FILED. CHAPTER 7 ATTORNEYS FEES

Flat Fee: \$ 306.00 court filing fee

THE BANKRUPTCY WILL NOT BE FILED UNTIL ATTORNEYS FEES AND COSTS ARE PAID IN FULL AND ALL REQUIRED DOCUMENTS ARE RECEIVED BY THE ATTORNEYS.

RETAINER: INITIAL RETAINER paid is an ADVANCED PAYMENT RETAINER. This is a present payment to Leeders & Associates in exchange for the commitment to provide legal services in the future, Ownership of this retainer passes to the lawyer immediately upon payment and is deposited in Leeders & Associates business account. However, if the representation ends before the retainer has been exhausted, the retainer is subject to refund under Rules 1.15(b), 1.16(d) and 1.16(d) of the Rules of Professional Conduct. You have the option to place the retainer into a security retainer, and must request this at the time the contract is signed, and this choice is yours alone. The purpose of the advanced payment retainer is to secure sufficient funds out of the reach of seizure in order to hire counsel.

Client Acceptance: initial:

CLIENT AND ATTORNEY AGREE TO THE FOLLOWING:

1) FULL DISCLOSURE & PRODUCTION OF DOCUMENTS - Client agrees to fully disclose all financial information to LEEDERS & ASSOCIATES, (hereinafter "LEEDERS") and understands that it is a Federal crime to withhold information from a bankruptcy petition. 2) TIMELY PAYMENT / LAW CHANGES - Client agrees to pay fees in full as soon as possible. Attorney's advice to client is based on current Local, State and Federal laws. Client agrees to hold LEEDERS harmless for damages related to changes in the law that affect client's ability to qualify for bankruptcy relief or to discharge debts within a bankruptcy case. 3) STATE LAW PROCEEDINGS - Client must personally appear at all state court proceedings. LEEDERS does not represent client in any non-bankruptcy matters in state or federal court, including, but not limited to, divorce proceedings, contempt hearings, citation to discover assets, rules to show cause, or any other civil lawsuits. 4) REFUNDS - If client chooses to terminate LEEDERS' representation at any time, client is only entitled to a refund of unearned fees. LEEDERS' hourly rate is \$300.00 per hour for purposes of determining any refund. Client must submit written request of cancellation. After receiving written notice, LEEDERS will take approximately 30 days to do an accounting and issue a refund check of any unearned attorneys fees paid to date. 5) REAFFIRMATIONS & RESCISSIONS - Reaffirmations are not required under the code. Reaffirmations must be filed within 60 days of the date first set for your §341 hearing. LEEDERS does not guarantee acceptance or filing of the reaffirmation if it poses an undue hardship on client. Client understands creditor must sign and file the reaffirmation, so return with ample time to do so before the deadline. Client may only rescind or cancel a reaffirmation agreement by sending written request by certified mail to LEEDERS no less than 30 after reaffirming the debt. 6) §341 MEETING OF CREDITORS. Client must attend a §341 meeting approximately four weeks after the standard of the reaffirming that the debt. 6) §341 MEETING OF CREDITORS. Client must attend a §341 meeting approximately four weeks after request by certained man to LEEDERS to less than 30 after tearithming the debt. 0) \$3.41 meeting date if client has not received notice of the meeting. LEEDERS must appear even if client does not. 7) ADVERSARY OBJECTIONS TO DISCHARGE: LEEDERS's fee for negotiating a settlement is approximately \$500.00 to be paid in advance of settlement. LEEDERS's hourly fee for litigating a discharge issue is \$300.00 per hour, ten hours to be paid in advance as retainer.

8) NSF CHECKS - Client agrees to pay a \$35.00 bounced check fee to LEEDERS for any returned checks not honored by client's bank for any reason. 9) GROUP PRACTICE/ CO-COUNSEL - Client permits all employees of LEEDERS to work on client's case and permits LEEDERS to hire co-counsel or independent attorneys to work on this matter and divide fees with them on the basis of work and responsibility. Client authorizes LEEDERS to have attorneys within the firm, or outside counsel, review client's file to explore other potential causes of action client may have. 10) AUDIT – I understand that the US Trustee may audit my bankruptey file and I agree to cooperate fully with the audit. I agree to preserve all financial information and documents used to create my bankruptcy petition for 2 years after discharge. 11) CREDIT COUNSELING. Client understands they must complete a pre- and post filing bankruptcy course. The pre-filing certificate is valid for 180 days, so case must be filed before expiration or course must be completed again at client's expense. The post-filing certificate must be filed within 45 days after case filing, so take the post-filing course as soon as possible after filing. If not timely filed, client's case may close without a discharge.

13) HOMEOWNER/CONDO ASSESSMENTS. Client understands that all Homeowner Association/Condo association fees are non dischargeable in bankruptcy, and client has a continuing obligation to pay all such charges, even if surrendering property, until property is sold or a foreclosure is completed. 14) GREEN INITIATIVE - LEEDERS will make all attempts to be green. This includes electronic case filing, scanning and destroying of client documents, sending email instead of first class mail. LEEDERS will make client documents available to client for pickup for 90 days after completion of the case, or else LEEDERS can mail them to client for \$20.00. Client documents will be destroyed 90 days after the close of the case. 15) CLIENT CONTACT INFORMATION - Client agrees to keep LEEDERS up to date with valid email address, phone numbers and mailing addresses for the duration of the case.

Possible additional fees not included in fee quote above:

- 1. Amendments: \$230.00 each time. There is no charge to amend for a change of address.
- 2. Missed court date or 341 meeting of creditors: \$200.00 each.
- 3. Reaffirmations \$100.00 each
- 4. Redemptions \$600.00 each Paid thru the vehicle refinancing.
- 5. Delay: \$150.00 Charge will only incur if 8 months has elapsed without: a client payment, return of mailed petition, or last request for ease information.
- 6. Avoiding Judgment Liens against real estate \$450.00
- 7. Avoiding lien on non-purchase money security interests \$400.00
- 8. Motion to reopen a closed bankruptcy case-\$600.00 For any motion to reopen a closed bankruptcy case for any reason once the case is discharged. These additional motion fees are to be paid prior to LEEDERS drafting such motion. Client acknowledges that there is a limited time to bring such motions.

Client Signature Contina Cappall Bate 600/19	_Spouse Signature	ie
4	Clark - 111-	
Attorney Signature X	DATE 6/20/15	

United States Bankruptcy CourtNorthern District of Illinois

		1 (of the H District of Himos		
In re	Christina Cappello		Case No.	
		Debtor(s)	Chapter 7	
	VI	ERIFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors:	44
	The above-named Debtor(s (our) knowledge.	s) hereby verifies that the list of credit	tors is true and con	rrect to the best of my
Date:	March 31, 2016	/s/ Christina Cappello Christina Cappello Signature of Debtor		

A/r Concepts 18-3 E Dundee Rd Barrington, IL 60010

Arnold Scott Harris PC 111 W Jackson Blvd Suite 600 Chicago, IL 60604

Aurora Police Department Red Light Photo Enforcement 1200 E Indian Trail Rd. Aurora, IL 60505

Blatt Hasenmiller Leibsker & Moore, 10 S LaSalle St. Suite 2200 Chicago, IL 60603

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Central Dupage Emergency Physician PO Box 366 Hinsdale, IL 60522

Chase PO BOX 659754 San Antonio, TX 78265-9754

Check N go 2222 Bloomingdale Rd. Glendale Heights, IL 60139

Citizens Bank Attn: Bankruptcy Dept 443 Jefferson Blvd Ms Rjw-135 Warwick, RI 02886

City of Chicago Bureau of Parking 121 N La Salle St RM 107 A Chicago, IL 60602 Comcast PO Box 3002 Southeastern, PA 19398

Comenity Bank/NY&CO PO BOX 182273 Columbus, OH 43218-2273

Credit Bureau Centre PO Box 273 Monroe, WI 53566-0273

Credit Management Attention: Bankruptcy Dept Po Box 118288 Carrollton, TX 75011

Dupage County Circuit Court Clerk 505 N County Farm Rd. Wheaton, IL 60189

DuPage Medical Group 15921 Collections Center Dr. Chicago, IL 60693-0159

First Source Advantage 205 Bryant Woods South Buffalo, NY 14228

Glendale Heights Police Department 300 Civic Center Plaza Glendale Heights, IL 60139

Gottleib Memorial Hospital 701 W. North Ave. Melrose Park, IL 60160

Illinois Tollway ATTN: Violation Administration Cent 2700 Ogden Ave. Downers Grove, IL 60515

Loancare Servicing Ctr Interstate Corporate Center Norfolk, VA 23502 Mcsi Inc Po Box 327 Palos Heights, IL 60463

midland credit management PO Box 60578 Los Angeles, CA 90060-0578

Penn Credit 220 Hickory St. Warren, PA 16365

Personal Finance/p312 1022 S. Mclean Blvd Elgin, IL 60123

Pierce & Associates One North Dearborn Suite 1300 Chicago, IL 60602

Portfolio Recovery Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541

Public Storage 8790 Golf Rd DesPlaines, IL 60016

Rodale Books 400 S 10th St. Emmaus, PA 18098

Sonnenschein Fnl Svcs 2 Transam Plaza Dr Ste 3 Oakbrook Terrace, IL 60181

Stoneberry PO Box 2820 Monroe, WI 53566-8020 Synchrony Bank/Amazon Attn: Bankruptcy Po Box 103104 Roswell, GA 30076

Synchrony Bank/Lowes PO BOX 965064 Orlando, FL 32896-5064

Synchrony Bank/Walmart Attn: Bankruptcy Po Box 103104 Roswell, GA 30076

UHaul PO Box 21501 Phoenix, AZ 85004

Vengroff, Williams & Associates PO Box 4155 Sarasota, FL 34230-4155

Village of Carol Stream 500 N. Gary Ave. Carol Stream, IL 60188

Village of Glendale Heights 300 Civic Center Plaza Glendale Heights, IL 60139-2691

Village of Melrose Park PO BOX 7722 Carol Stream, IL 60197-7722

Village of stone Park PO BOX 7725 Carol Stream, IL 60197-7725

Village of Villa Park Photo Enforcement Program 75 Remittance Dr. Suite 6658 Chicago, IL 60675-6658 Webbank/fingerhut 6250 Ridgewood Roa Saint Cloud, MN 56303

Winfield Labratory Consultants Dept 4408 Carol Stream, IL 60122-4408

Winfield Radiology Consultants 6910 S Madison St Willowbrook, IL 60527